

1614
Docket No.: PF-0683 USN

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop: Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 28, 2003.

Printed: CATHLEEN M ROCCO

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Bandman et al.Title: REGULATORS OF INTRACELLULAR PHOSPHORYLATIONSerial No.: 09/937,060Filing Date: April 13, 2002Examiner: To Be AssignedGroup Art Unit: 1614

Mail Stop: Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

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1600/2900FEE TRANSMITTAL SHEET

Sir:

Transmitted herewith are the following for the above-identified application:

1. Return Receipt Postcard; and
2. Response to Restriction Requirement (7 pp.);
3. Certificate of Revocation of Power of Attorney and Appointment of New Attorneys (2 pp.).

The fee has been calculated as shown below.

| Claims | Claims After Amendment | - | Claims Previously Paid For | = | Present Extra | Other Than Small Entity Rate | Fee | Additional Fee(s) |
|---|------------------------|---|----------------------------|---|---------------|------------------------------|-----|-------------------|
| Total | | - | 20 | | | x\$18.00 | | \$ |
| Indept. | | - | 3 | | | x\$84.00 | | \$ |
| First Presentation of Multiple Dependent Claims | | | | | | +280.00 | | \$ |
| Total Fee: | | | | | | | | \$ |

☒ No additional Fee is required.☐ Please charge Deposit Account No. 09-0108 in the amount of : \$ _____

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. 09-0108. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

INCYTE CORPORATION

Cathleen M. Rocco

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Date: 28 April 2003

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